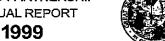
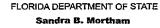
## FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

## LIMITED PARTNERSHIP ANNUAL REPORT





Secretary of State DIVISION OF CORPORATIONS

98 DEC 22 PM 3: 1.0

1. Name of Limited Partnership	1a. DOCUMENT # A9300000688		JO DEC 22 1	1/8	
BYRONAIR APARTMENTS, LTD.					
Mailing Address  1882 BRICKELL AVE. MIAMI FL 33129	Principal Office Address  1882 BRICKELL AVE. MIAMI FL 33129		3. Date Formed or Registered 07/01/1993 3a. Date of Last Report 05/05/1998	5a. Capital Contributions as Shown on record. \$200,000.00  5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address Suite, Apt. #, etc.	2a. Principal Office Address Suite, Apt. #, etc.		4. State or Country of Formation FL 6. FEI Number	to date:	
City & State  Zip Country	City & State  Zip Country		65-0421227 7. Certificate of Status Desired 8. Make check payable to: Dept. of St	\$8.75 Additional Fee Required ate (See reverse side for fee Information)	
1882 BRICKELL AVE.  MIAMI FL 33129  Suite, A		Street Address (P.O. B  2000  Suite, Apt. #, etc.  806  City  MIAM  mited partnership organ Such change was auth	nership organized or registered under the laws of the State of Florida, submits this statement nge was authorized by its general partner(s). I hereby accept the appointment of registered  DATE 12/16/98		
MUST I	BE REGISTERED AND Address of Each General P.	ACTIVE WIT	City, State & Zip Code	110 Registration/	
LA FRONTERA INVESTMENTS, INC	1882 BRICKELL AVE.	(di)(Deis)	MI FL 33129 800027 -01/14/9	P93000041702  P93000041702  42408	
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.					

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and the Immy signature shall have the same legal effects as if made under eath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as requir

SIGNATURE

EDUARDO FERNANDE Z Typed or Printed Name of General Partner Signing Form \_

Daytime Telephone Number 305